

CALIFORNIA TYPE EVALUATION PROGRAM

Application for Evaluation of a Weighing or Measuring Device(s)

All costs incurred by CTEP will be paid by the applying organization.

APPLICANT

Company Name:			Contact:
Street Address:			Email Address:
City:	State:	Zip:	Telephone #:
Web Site Address:			Fax #:

GENERAL

Describe the device you are submitting for evaluation:
State the intended purpose of the device(s):

The following documentation must accompany each application:

- ☐ Technical information such as working drawings, functional drawings, electrical diagrams, piping diagrams, operating and service manuals (these may be hand drawn).
- ☐ Specifications, photographs and descriptions sufficient to provide understanding of construction and method of operation of the instrument and components.

Highly Recommended:

- ☐ Consult the information on the Applicant Pre-Evaluation Checklist. Complete the checklist and submit it with the application.

All descriptive material is required to be in English. Required documentation and application submitted to the Department will not be returned.

Evaluation will not begin until the Type Evaluation Program receives all required documentation.

<i>I declare that the instrument being submitted for evaluation has been designed and constructed to relevant California and national safety standards and that no other instrument or component type produced by or for the manufacturer uses the same model designation(s).</i>

Signature: _____

Date: _____

Submit the application to:

Division of Measurement Standards
Attn: California Type Evaluation Program (CTEP)
6790 Florin Perkins Road, Suite 100
Sacramento, CA 95826-4808
Telephone: (916) 229-3000
Fax: (916) 229-3026
Email: dms@cdfa.ca.gov
Web: www.cdfa.ca.gov/dms/